



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: MICHIANA SURGERY CENTER LLC

Street Address: 3212 Hickory Road

City: Mishawaka

County: St. Joseph

Administrator Name: Danielle Kertai

Administrator Email: danipainmgmnt@gmail.com

ASC Web Address: michianasurgery.com

Fiscal Year: 2015

Accredited: ☒ Yes ☐ No

Name of Accrediting Body: Joint Commission

Deemed Status: ☒ Yes ☐ No

Corporate Tax Status: ☒ For Profit ☐ Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2840	4000
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code		Total Procedures
62311		1029
64483		756
64490		299
64491		295

64493	415
64494	396
62310	171
20610	94
63635	68
63650	45

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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